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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION</b> (only for purposes of designation of the United States of America)	Attorney Docket Number		PRD2091US-PCT	
	First Named Inventor		Maria Antonia Vitiello	
	<i>COMPLETE IF KNOWN</i>			
	Application Number			
	Filing Date			
	Group Art Unit			
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)		OR		
Examiner Name				

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.  
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Modeling Of Systemic Inflammatory Response To Infection  
*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 11/17/2004 as International Application Number PCT/US2004/038648.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

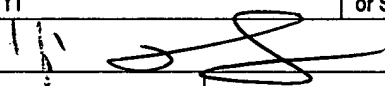
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
<b>Application Number(s)</b>	<b>Filing Date (MM/DD/YYYY)</b>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/523,296	11/17/2003	
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
<b>Application Serial No.</b>	<b>Filing Date</b>	<b>Status</b>
I hereby appoint:		
<input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 0 10px;">000027777</span> → AND		
<input checked="" type="checkbox"/> Practitioner(s) named below: <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <u>Name</u>            Linda S. Evans         </div> <div style="width: 40%;"> <u>Registration Number</u>            33,873         </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to <b>Linda S. Evans</b> at telephone number <b>(858) 320-3406</b>		
Direct all correspondence to:      Customer Number <input checked="" type="checkbox"/> or Bar Code Label <span style="border: 1px solid black; padding: 0 10px;">000027777</span> OR <input type="checkbox"/> Correspondence address below		
Name:    Philip S. Johnson, Esq.		
Address:   Johnson & Johnson Patent Law Dept.		
Address:   One Johnson & Johnson Plaza		
City:        New Brunswick	State:   New Jersey	ZIP        08933-7003
Country    United States of America	Telephone: 858-320-3406	Fax:       858-784-3044

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Maria Antonia		Family Name or Surname Vitiello	
Inventor's Signature		Date	
Residence: City San Diego	State CA	Country US	Citizenship Italy
Mailing Address 7389 High Avenue			
City San Diego	State CA	ZIP 92037	Country US
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Yi		Family Name or Surname Zhang	
Inventor's Signature 		Date 5-15-06	
Residence: City San Diego	State CA	Country US	Citizenship People's Republic of China
Mailing Address 15241 Cayenne Creek Court			
City San Diego	State CA	ZIP 92127	Country US
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Dhammika Jayanath		Family Name or Surname Amaratunga	
Inventor's Signature		Date	
Residence: City Bridgewater	State NJ	Country US	Citizenship US
Mailing Address 501 Porter Way West			
City Bridgewater	State NJ	ZIP 08807	Country US

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NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Tao		Family Name or Surname Shi	
Inventor's Signature <i>Tao Shi</i>		Date 5/2/06	
Residence: City <del>San Gabriel</del> T.S. SAN DIEGO	State CA	Country US	Citizenship People's Republic of China
Mailing Address <del>9053 East Fairview Avenue</del> T.S. 13945 GUNNISON CT.			
City SAN DIEGO <del>San Gabriel</del> T.S.	State CA	ZIP 92129 <del>91775</del> T.S.	Country US

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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Christine K.		Family Name or Surname Ward	
Inventor's Signature		Date	
Residence: City Malvern	State PA	Country US	Citizenship US
Mailing Address 115 Tudor Court			
City Malvern	State PA	ZIP 19355	Country US

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<b>Application Serial No.</b>	<b>Filing Date</b>	<b>Status</b>
I hereby appoint:  <input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 2px;">000027777</span> → <b>AND</b>  <input checked="" type="checkbox"/> Practitioner(s) named below: <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <u>Name</u>            Linda S. Evans         </div> <div style="width: 40%;"> <u>Registration Number</u>            33,873         </div> </div>		
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Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; padding: 2px;">000027777</span> OR <input type="checkbox"/> Correspondence address below		
<b>Name:</b> Philip S. Johnson, Esq.		
<b>Address:</b> Johnson & Johnson Patent Law Dept..		
<b>Address:</b> One Johnson & Johnson Plaza		
<b>City:</b> New Brunswick	<b>State:</b> New Jersey	<b>ZIP:</b> 08933-7003
<b>Country:</b> United States of America	<b>Telephone:</b> 858-320-3406	<b>Fax:</b> 858-784-3044

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Maria Antonia		Family Name or Surname Vitiello	
Inventor's Signature <i>Maria Antonia Vitiello</i>		Date May 12, 2006	
Residence: City San Diego	State CA	Country US	Citizenship Italy

Mailing Address 7389 High Avenue			
City San Diego	State CA	ZIP 92037	Country US

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Yi		Family Name or Surname Zhang	
Inventor's Signature		Date	
Residence: City San Diego	State CA	Country US	Citizenship People's Republic of China

Mailing Address 15241 Cayenne Creek Court			
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Dhammika Jayanath		Family Name or Surname Amaratunga	
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Residence: City Bridgewater	State NJ	Country US	Citizenship US

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Given Name (first and middle (if any)) Christine K.		Family Name or Surname Ward	
Inventor's Signature		Date	
Residence: City Malvern	State PA	Country US	Citizenship US
Mailing Address 115 Tudor Court			
City Malvern	State PA	ZIP 19355	Country US



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<b>Name:</b> Philip S. Johnson, Esq.		
<b>Address:</b> Johnson & Johnson Patent Law Dept.		
<b>Address:</b> One Johnson & Johnson Plaza		
<b>City:</b> New Brunswick	<b>State:</b> New Jersey	<b>ZIP</b> 08933-7003
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Inventor's Signature		Date	
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Inventor's Signature <i>DJ Amaratunga</i>		Date 4/11/06	
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I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

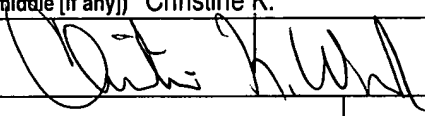
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
<b>Application Number(s)</b>	<b>Filing Date (MM/DD/YYYY)</b>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/523,296	11/17/2003	
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
<b>Application Serial No.</b>	<b>Filing Date</b>	<b>Status</b>
I hereby appoint:		
<input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 2px;">000027777</span> → <b>AND</b>		
<input checked="" type="checkbox"/> Practitioner(s) named below: <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <u>Name</u>            Linda S. Evans         </div> <div style="width: 40%;"> <u>Registration Number</u>            33,873         </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to <b>Linda S. Evans</b> at telephone number <b>(858) 320-3406</b>		
Direct all correspondence to:     Customer Number <input checked="" type="checkbox"/> or Bar Code Label <span style="border: 1px solid black; padding: 2px;">000027777</span> OR <input type="checkbox"/> Correspondence address below		
Name: <b>Philip S. Johnson, Esq.</b>		
Address: <b>Johnson &amp; Johnson</b> <b>Patent Law Dept.</b>		
Address: <b>One Johnson &amp; Johnson Plaza</b>		
City: <b>New Brunswick</b>	State: <b>New Jersey</b>	ZIP <b>08933-7003</b>
Country <b>United States of America</b>	Telephone: <b>858-320-3406</b>	Fax: <b>858-784-3044</b>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Maria Antonia		Family Name or Surname Vitiello	
Inventor's Signature		Date	
Residence: City San Diego	State CA	Country US	Citizenship Italy
Mailing Address 7389 High Avenue			
City San Diego	State CA	ZIP 92037	Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Yi		Family Name or Surname Zhang	
Inventor's Signature		Date	
Residence: City San Diego	State CA	Country US	Citizenship People's Republic of China
Mailing Address 15241 Cayenne Creek Court			
City San Diego	State CA	ZIP 92127	Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Dhammika Jayanath		Family Name or Surname Amaratunga	
Inventor's Signature		Date	
Residence: City Bridgewater	State NJ	Country US	Citizenship US
Mailing Address 501 Porter Way West			
City Bridgewater	State NJ	ZIP 08807	Country US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Tao		Family Name or Surname Shi	
Inventor's Signature		Date	
Residence: City San Gabriel	State CA	Country US	Citizenship People's Republic of China
Mailing Address 9053 East Fairview Avenue			
City San Gabriel	State CA	ZIP 91775	Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Christine K.		Family Name or Surname Ward	
Inventor's Signature 		Date 4/18/2006	
Residence: City Malvern	State PA	Country US	Citizenship US
Mailing Address 115 Tudor Court			
City Malvern	State PA	ZIP 19355	Country US